24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund	
	C C00448696
Check if 24-hour report X 48-hour report New report Amends report filed	d on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Senate Conservatives Fund	M M / D D / Y Y Y
Mailing Address PO Box 388	03 15 2014 Amount
City State Zip Code	243.95
Alexandria VA 22313-0388	Transaction ID : ED67BDA65A2984686B7F Date of Disbursement or Obligation
Purpose of Expenditure IE-Smith-Online Processing Category/ Type	03 15 7 2014
Name of Federal Candidate Support Office	e Sought: X House District: 02
Bryan Smith Oppose	President Senate State: ID
Calendar Year-To-Date Per Election for Office Sought Disbut 243.95 Disbut 243.95	ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Envision Printers/Marketing	M M / D D / Y Y Y Y
Mailing Address 2 Riverbend Pkwy	03 19 2014
2 Killolbona i Killy	Amount
City State Zip Code	10873.63
Leesburg VA 20176-0000	Transaction ID : E5D38128EB7824E0093E Date of Disbursement or Obligation
Purpose of Expenditure Category/ Category/	M M / D D / Y Y Y Y
IE-Smith-Direct Mail Production Type	03 19 2014
Name of Federal Candidate Support Offic	e Sought: X House District: 02
Bryan Smith Oppose	President Senate State: ID
	ursement For: X Primary General
Per Election for Office Sought 11117.58 2014	4 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	11117.58
(b) SUBTOTAL of Unitemized Independent Expenditures	
	7 7 7
(c) TOTAL Independent Expenditures	11117.58
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Paul Kilgore	M / D D / Y Y Y Y
Signature [Electronically Filed] Date	03 19 2014